2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000026774

Entity Name: MIAMI TOTAL HEALTH, INC.

FILED Nov 01, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

15064 SW 30 TERRACE P.O. BOX 612382

MIAMI, FL 33185 NORTH MIAMI, FL 33181 US

Current Mailing Address: New Mailing Address:

15064 SW 30 TERRACE P.O. BOX 612382

MIAMI, FL 33185 NORTH MIAMI, FL 33181 US

FEI Number: 02-0681401 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, YURI
15064 SW 30 TERRACE
MIAMI, FL 33185 US

RODRIGUEZ, YURI
11930 N BAYSHORE DRIVE #403
NORTH MIAMI, FL 33181 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: YURI RODRIGUEZ 11/01/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: RODRIGUEZ, YURI Name: RODRIGUEZ, YURI

 Name:
 Name:
 North Gold;
 North Gold;
 North Gold;
 North Mayli, FL 33181 US

 City-St-Zip:
 MIAMI, FL 33185
 City-St-Zip:
 NORTH MIAMI, FL 33181 US

Title: D () Delete Title: D (X) Change () Addition Name: JONES, RACHEL D (X) Change () Addition Name: JONES, RACHEL

 Address:
 15064 SW 30 TERRACE
 Address:
 11930 N BAYSHORE DRIVE #403

 City-St-Zip:
 MIAMI, FL 33185
 City-St-Zip:
 NORTH MIAMI, FL 33181 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YURI RODRIGUEZ D 11/01/2004